

BENEFITS NEWS

An Information Publication for State of California Employees

Rural Health Care Equity Program

The Rural Health Care Equity Program helps State employees and retirees living in areas where there's no option to enroll in a State-sponsored HMO. The program does this by reimbursing some of your health costs, which tend to be higher when there isn't an HMO available.

Who's covered?

You're automatically eligible for the Rural Health program if you meet two conditions:

- You're enrolled in a CalPERS PPO health plan (PERSCare or PERS Choice); and
- Your home address is in an area where CalPERS doesn't offer an HMO option.

DPA offers a [zip code finder](#) on its Web site that can tell you if you meet the second condition. (Click on this link, or go to www.dpa.ca.gov, click on *Benefits*, then *Rural Health Care Equity Program*; look for the "click here" link.)

You're **ineligible** for the Rural Health program if you receive the Cash Option under FlexElect or CoBen.

What expenses will the Rural Health program reimburse?

- Deductibles and co-insurance
- A portion of your 2005 monthly premium (see chart below)

Premium reimbursement for 2005	
1-party enrollment	\$20.64 /mo.
2-party enrollment	\$40.47 /mo.
3-party enrollment	\$53.04/ mo.

- If you're enrolled in a FlexElect Medical Reimbursement Account, you may **not** claim reimbursement for the same expense from both programs (Rural Health and FlexElect).
- Copays for office visits and prescriptions are **not** reimbursable.

How do I get reimbursed?

Submit a claim form to our administrator, Application Software, Inc. (ASI), at the following address:

ASI
P.O. Box 657
Columbia, MO 65205-0657

To inquire about a claim, call ASI at 1-800-659-3035.

How do I get more claim forms?

[Claim forms](#) may be printed from our Web site, or you may call DPA's Benefits Division at 916-327-1439. (At our Web site, click on *Benefits*, then *Rural Health Care Equity Program*; scroll down to the link for the form.)

Is there a limit on Rural Health benefits?

Based on collective bargaining agreements, the current cap on Rural Health benefits is \$1,500 per employee per fiscal year. (Bargaining Unit 5 and 6 employees should refer to their new contract agreement.)

Is there a change for Bargaining Units 5 and 6?

During recent contract negotiations, Units 5 and 6 agreed to a monthly health stipend for their rural members. It goes into effect January 1, 2005. DPA will mail details of this change to eligible members in these units.

What's the "secondary reimbursement" process for Rural Health?

The allotment for Rural Health employees is tracked by bargaining unit. (There is a separate allocation for all excluded employees.) Funds unclaimed during a fiscal year go into each unit's "secondary reimbursement" account, which may carry over to the next year. Employees whose claims and monthly premium reimbursements exceed the annual \$1,500 limit receive reimbursement for their "excess" expenses from their unit's secondary account, normally paid in November.

You don't need to file additional claims for secondary reimbursement. Any reimbursement that exceeds the annual limit will be paid automatically from the secondary account, if funds are available. However, if your bargaining unit's secondary account lacks sufficient funds to fully reimburse all excess expenses of the unit's members, it will reduce your secondary reimbursement. The percentage reduction will be the same for each employee in the unit.

Are retirees eligible for Rural Health benefits?

If you're a State retiree living in California, your eligibility for Rural Health benefits depends on the type of health plan you're enrolled in (Basic or Medicare Supplement) and your zip code. Contact the DPA Benefits Division for details.

FlexElect Changes in 2005

If you enrolled in a FlexElect reimbursement account for 2005, be aware that the mailing address to submit 2005 claims is different from the current address. That's because a new record-keeper, Fringe Benefits Management Company, will replace the current record-keeper, ASI. (Claims for expenses incurred in 2004, which must be filed by June 30, 2005, should go to ASI.)

The new address is listed in the [2005 FlexElect handbook](#), available online and from your Personnel Office.

Additional changes for 2005 that affect FlexElect medical reimbursement accounts are listed below.

- You may be reimbursed for the full or initial cost of orthodontic treatment during the plan year in which the braces are installed.
- You may claim up to \$.14 per mile for transportation costs for the purpose of health care, an increase from the current \$.13 per mile.
- You may claim reimbursement for over-the-counter medications if used to treat an existing or imminent medical condition.
- If you enroll in a health club program prescribed by a physician for a medical condition, you may be able to claim reimbursement. However, if you would have or already had joined the health club without this medical condition, the expense does not qualify.

For More Information

Benefits Division

(916) 322-0300
CALNET 492-0300

ARAG Group

Group Legal Services Plan
1-800-247-4184

Dental Program

(916) 324-0525
CALNET 454-0525

Employee Assistance Program

MBG (Merit Behavioral Care)
1-800-632-7422

FlexElect Program

(916) 327-6429
CALNET 467-6429

Health Promotion Program

(916) 324-9398
CALNET 454-9398

Merit Award Board

(916) 324-0520
CALNET 454-0520

Safety Program

(916) 327-1438
CALNET 467-1438

Savings Plus Program

1-866-566-4777

SPPFORU.COM

Contact Us Tab

Vision Service Plan

1-800-622-7444 or
(916) 851-5000

Workers' Comp. Program

(916) 445-9792
CALNET 485-9792

Fax Numbers

Benefits Division

(916) 322-3769
CALNET 492-3769

Savings Plus Program

(916) 327-1885
CALNET 467-1885

TDD (Any unit in DPA)

(916) 327-4266
CALNET 467-4266

Internet Address

www.dpa.ca.gov